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60 Eighth Street, N.E. Atlanta, Georgia 30309

September 18, 2000

## VIA FEDERAL EXPRESS

Dennis Bruns, CEO Hilton Head Medical Center Bluffton Okatie Outpatient Center 40 Okatie Center Blvd., South Okatie, SC 29910

Inspection ID: 2220550002

## WARNING LETTER (00-ATL-64)

Dear Mr. Bruns:

Your facility was inspected on 8/30/00 by a representative of the South Carolina Department of Health, Environmental Control (DHEC), Radiological Health Branch, acting on behalf of the Food and Drug Administration (FDA). This inspection revealed that your facility failed to comply with certain Quality Standards for Mammography as specified in Title 21, Code of Federal Regulations (CFR), Part 900.12, as follows:

Phantom OC records were missing for 4 weeks for unit #1, located in the mammography room.

The specific deficiency noted above appeared under the Level 1 heading on your MQSA facility Inspection Report, which was issued at the close of the inspection. This deficiency may be symptomatic of serious underlying problems that could compromise the quality of mammography at your facility.

It is your responsibility to ensure adherence to each requirement of the Mammography Quality Standards Act of 1992 (MQSA) and FDA's regulations. You are responsible for investigating and determining the causes of the deficiencies that the inspection identifies and promptly initiating permanent corrective actions.

If you fail to promptly correct this deficiency, FDA may, without further notice, initiate regulatory action. Under MQSA, FDA may:

• impose civil money penalties on a facility of up to \$10,000 for each failure to substantially comply with, or each day of failure to substantially comply with, the Standards.

- suspend or revoke a facility's FDA certificate for failure to comply with the Standards.
- seek an injunction in federal court to prohibit any mammography activity that constitutes a serious risk to human health.

Please note that FDA regulations do not preclude a State from enforcing its own State mammography laws and regulations. In some cases, these requirements may be more stringent than FDA's. When you plan your corrective action(s), therefore, you should consider the more stringent State requirements, if any.

Within 15 working days after receiving this letter, you should notify FDA in writing of:

- the specific steps you have taken to correct all of the violations noted in this letter;
- each step your facility is taking to prevent the recurrence of similar violations;
- equipment settings (including technique factors), raw test data, and calculated final results, where appropriate; and
- sample records that demonstrate proper recordkeeping procedures, if the noncompliances that were found relate to quality control or other records. (Note: Patient names or identification should be deleted from any copies submitted.)

If your facility is unable to complete the corrective action within 15 working days, you should state the reason for the delay and the time within which corrections will be completed. Please send the original copy of your response to:

Serene A. Kimel, Compliance Officer U.S. Food and Drug Administration 60 8<sup>th</sup> St., NE Atlanta, GA 30309

With a copy to:

South Carolina DHEC Radiological Health Branch 2600 Bull Street Columbia, SC 29201

and

Thomas Clarida U.S. Food and Drug Administration 5701 Executive Center Drive, Suite 104 Charlotte, NC 28212

You may choose to address both FDA and state requirements in your response. If you have any questions regarding this letter or how to ensure you are meeting MQSA standards, please feel free to contact Thomas Clarida at 704-344-6116.

## Sincerely yours,

Ballard H. Graham, Director Atlanta District

Cc: Ms. Priscilla F. Butler, M.S., FAAPM, FACR Director Breast Imaging Accreditation Programs 1891 Preston White Drive Reston, Virginia 20191